

Wisconsin Department of Safety & Professional Services

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PHARMACY EXAMINING BOARD

PHARMACY VARIANCE REPORT

TECHNICIAN:PHARMACIST RATIO

COMPLETED REPORTS MUST BE SUBMITTED TO THE BOARD ON OR BEFORE JANUARY 31 AND JULY 31 OF EACH YEAR AFTER A TECHNICIAN TO PHARMACIST RATIO VARIANCE IS GRANTED. PLEASE NOTE: ADDITIONAL DETAILS MAY BE REQUESTED BY THE BOARD ON A CASE BY CASE BASIS.

DBA NAME OF PHARMACY: (This must be the name on the pharmacy label.)	WI LICENSE NUMBER:	DATE VARIANCE GRANTED:
TELEPHONE:	EMAIL:	
CONTACT PERSON:		
PHARMACY ADDRESS (pharmacy location to which the variance applies): number, street, city, zip code		

RATIO VARIANCE REPORT TIME PERIOD

☐ January 1-June 30

☐ July 1-December 31

Reporting Period	Reporting Period	Technicians Monthly Average	Pharmacist Monthly Average	Average Monthly Ratio
January	July			
February	August			
March	September			
April	October			
May	November			
June	December			

OTHER REPORTING REQUIREMENTS: ☐ Yes ☐ No If yes, attach additional sheets.

ADDITIONAL INFORMATION/COMMENTS:

Wisconsin Department of Safety & Professional Services

I/We declare that the foregoing statements are true and correct to the best of my/our knowledge and belief; the variance applied for is to cover only the pharmacy indicated above and at the location(s) specified; and that I/we will comply with the provisions of the Wisconsin Statutes and the Rules of the Pharmacy Examining Board.

Reporter Signature

Title

Date

Printed Name of person signing above

#3015 (11/12)
Ch. 450, Stats.

Committed to Equal Opportunity in Employment and Licensing

Technician:Pharmacist Ratio Report Form

Pharmacy Name: _____ **WI License #:** _____ **Date:** ____/____/____

	<input type="checkbox"/> JAN			<input type="checkbox"/> FEB			<input type="checkbox"/> MAR			<input type="checkbox"/> APR			<input type="checkbox"/> MAY			<input type="checkbox"/> JUN		
	<input type="checkbox"/> JUL			<input type="checkbox"/> AUG			<input type="checkbox"/> SEP			<input type="checkbox"/> OCT			<input type="checkbox"/> NOV			<input type="checkbox"/> DEC		
DAY	Techs	R.Ph	Ratio	Techs	R.Ph	Ratio	Techs	R.Ph	Ratio	Techs	R.Ph	Ratio	Techs	R.Ph	Ratio	Techs	R.Ph	Ratio
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Tech: The number of technician hours for the day
R.Rph: The number of Pharmacist hours for the day
Ratio: Daily ratio